



# Incident Report

Print Date/Time: 11/28/2016 11:23

Login ID: ss0139

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00023543

**Incident Date/Time:** 11/26/2016 7:36:00 PM  
**Location:** 10300 BLK LUNDEEN PKWY  
LAKE STEVENS WA 98258  
**Phone Number:**  
**Report Required:** No  
**Prior Hazards:** No  
**LE Case Number:**

**Incident Type:** Collision  
**Venue:** Lake Stevens  
**Source:** Officer-Initiated  
**Priority:** 3  
**Status:** 3  
**Nature of Call:**

## Unit/Personnel

Unit	Personnel
1913	SS0095-Miner
1944	SS0133-Heinemann

## Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Driver	LARGE, ETHAN ISAIAH ALLEN	2103 97TH DR SE LAKE STEVENS WA 98258	(425) 530-9648	White	Male	01/13/1997
2	Involved Party	MULLEN, STEVEN ROY	2102 1/2 117TH AVE Lake Stevens WA 982580000	(425) 334-8187	White	Male	02/04/1945

## Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car	2003	Dodge	Dakota		C22387F	WA
Involved Vehicle	Passenger Car	2004	Subaru	Impreza	White	AYZ4932	WA

## Disposition(s)

Disposition	Count
M	1
S	1

## Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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## COLLISION REPORT

STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT

1591971

REPORT NO. **E612670**

CASE #	2016-00023543		
LOCAL AGENCY CODING	WA0311900		
TOTAL # OF UNITS	02	OBJECT STRUCK	

INTERSTATE	<input type="checkbox"/>	CITY STREET	<input checked="" type="checkbox"/>	FIRE RESULTED	<input type="checkbox"/>
STATE ROUTE	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	STOLEN VEHICLE	<input type="checkbox"/>
COUNTY RD	<input type="checkbox"/>	PRIVATE WAY	<input type="checkbox"/>	HIT & RUN INVOLVED	<input type="checkbox"/>

TRIBAL RESERVATION	
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M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	N	E	IN	OF	CITY #
DATE OF COLLISION	11	-	26	-	2016			1934	31						0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION	<input checked="" type="checkbox"/>	NON-INTERSECTION	<input type="checkbox"/>	
LUNDEEN PARKWAY				BLOCK NO.	
				MILE POST	

DISTANCE		MILES	<input type="checkbox"/>	N	<input type="checkbox"/>	E	OF (REFERENCE OR CROSS STREET)	CALLOW RD
		FEET	<input type="checkbox"/>	S	<input type="checkbox"/>	W		

UNIT 01	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL-CYCLE	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4255309648
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LAST NAME	LARGE	FIRST NAME	ETHAN	MIDDLE INITIAL	I
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STREET NEW ADDRESS	2103 97TH DR SE
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CITY	LAKE STEVENS	ST	WA	ZIP	98258
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	LARGE037BL	STATE	WA	SEX	M	D.O.B. MMDDYYYY	01	-	13	-	1997
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	3	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	AYZ4932	STATE	WA	VIN#	JF1GD29694H501925
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2004	MAKE	SUBA	MODEL	IMPREZ	STYLE	P4	VEHICLE TOWED	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. RONALD LARGE 2103 97TH DR SE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	AMERICAN FAMILY MUTUAL 2021496906FPPAWA
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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UNIT 02	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL-CYCLE	<input type="checkbox"/>	PEDESTRIAN	<input type="checkbox"/>	PROPERTY OWNER	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4253348187
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LAST NAME	MULLEN	FIRST NAME	STEVEN	MIDDLE INITIAL	R
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STREET NEW ADDRESS	2102 1/2 117TH AVE NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982580000
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CDL		RESTRICTIONS	B	ENDORSEMENTS	
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DRIVER'S LICENSE #	MULLESR553CD	STATE	WA	SEX	M	D.O.B. MMDDYYYY	02	-	04	-	1945
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	C22387F	STATE	WA	VIN#	1D7HG32N73S197496
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2003	MAKE	DODG	MODEL	DAKPU	STYLE	PK	VEHICLE TOWED	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. STEVEN MULLEN 2102 1/2 117TH AVE NE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	FARMERS 186451109
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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OFFICER'S NAME (PRINT)	G. HEINEMANN	BADGE OR ID #	0133	AGENCY	WA0311900
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**STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E612670**CASE # **2016-00023543**
**ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)**

NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					
NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					
NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					

**NARRATIVE**

On the listed date and time, Unit 1 was traveling behind Unit 2, both traveling westbound towards Lundeen Parkway, from Lakeview DR. Both vehicles had entered a roundabout when Unit 2 stopped for a female walker using a crosswalk to cross Lundeen Parkway at the Lundeen Parkway exit of the roundabout. Unit 1 did not stop in time and struck the rear of Unit 2. Unit 1 had heavy front end damage and the driver called a private tow. Unit 2 had minimal damage and drove away from the scene. Both drivers denied injuries and refused aid on scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**G. HEINEMANN**
**11-27-16 01:01 AM**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

**C. WELLS 0131**
**11/27/2016 2:52:54 PM**

BADGE OR ID #	<b>0133</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>7:36 PM</b>	TIME POLICE ARRIVED	<b>7:36 PM</b>
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REPORT NO. E612670

CASE # 2016-00023543

DATE AND TIME  
OF COLLISION 11/26/16 19:34

